



## Complete Summary

---

### TITLE

Breast cancer screening: percent of women age 50 to 69 screened in the past two years for breast cancer.

### SOURCE(S)

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percent of women age 50 to 69 screened in the past two years for breast cancer.

### RATIONALE

Breast cancer is the second most common type of cancer among American women, with approximately 178,000 new cases reported each year (American Cancer Society, Cancer Facts & Figures 2007). It is most common in women over 50. Women whose breast cancer is detected early have more treatment choices and better chances for survival. Screening by mammography (an x-ray of the breast) has been shown to reduce mortality by 20 percent to 30 percent among women 40 and older.

There are several guidelines addressing mammography screening, some of which differ in their recommendations. The US Preventive Services Task Force (USPSTF) 2007 guidelines recommend screening every 1 to 2 years starting at age 40. The recommendations note that evidence is strongest for women aged 50 to 69, with weaker evidence for women aged 40 to 49 because the incidence of breast cancer is lower among women in this age group. The USPSTF concluded that the evidence is also generalizable to women aged 70 and older (who face a higher absolute risk for breast cancer) if their life expectancy is not compromised by comorbid disease. The USPSTF breast cancer screening guidelines are endorsed by the Veterans Administration (VA) National Center for Health Promotion and Disease Prevention, Office of Patient Care Services.

## **PRIMARY CLINICAL COMPONENT**

Breast cancer; screening mammography

## **DENOMINATOR DESCRIPTION**

Women in the NEXUS Clinics cohort aged 52 to 69 at the time of the qualifying visit (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

## **NUMERATOR DESCRIPTION**

Women with evidence of a mammography performed in the past two years (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

## **Evidence Supporting the Measure**

### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

### **NATIONAL GUIDELINE CLEARINGHOUSE LINK**

- [Screening mammography for women 40 to 49 years of age: a clinical practice guideline from the American College of Physicians.](#)

## **Evidence Supporting Need for the Measure**

### **NEED FOR THE MEASURE**

Unspecified

## **State of Use of the Measure**

### **STATE OF USE**

Current routine use

**CURRENT USE**

External oversight/Veterans Health Administration  
Internal quality improvement

**Application of Measure in its Current Use**

**CARE SETTING**

Ambulatory Care  
Physician Group Practices/Clinics

**PROFESSIONALS RESPONSIBLE FOR HEALTH CARE**

Advanced Practice Nurses  
Physician Assistants  
Physicians

**LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Single Health Care Delivery Organizations

**TARGET POPULATION AGE**

Age 50 to 69 years

**TARGET POPULATION GENDER**

Female (only)

**STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

**Characteristics of the Primary Clinical Component**

**INCIDENCE/PREVALENCE**

See the "Rationale" field.

**ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

**BURDEN OF ILLNESS**

Unspecified

## UTILIZATION

Unspecified

## COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

## IOM CARE NEED

Staying Healthy

## IOM DOMAIN

Effectiveness

## Data Collection for the Measure

## CASE FINDING

Users of care only

## DESCRIPTION OF CASE FINDING

Women in the NEXUS Clinics cohort\* aged 52 to 69

\*Refer to the original measure documentation for patient cohort description.

## DENOMINATOR SAMPLING FRAME

Patients associated with provider

## DENOMINATOR INCLUSIONS/EXCLUSIONS

### Inclusions

Women in the NEXUS Clinics cohort\* aged 52 to 69 at the time of the qualifying visit

\*Refer to the original measure documentation for patient cohort description. (**Note:** Although recommendations start at 50, the performance measure begins at age 52 to allow two year period to be accomplished.)

### Exclusions

- History of bilateral mastectomy
- Terminal illness as indicated by documented diagnosis of cancer of the esophagus, liver, or pancreas

- Enrolled in a Veterans Health Administration (VHA) or community-based hospice program
- Documented in the medical record to have a life expectancy less than 6 months on the PROBLEM LIST or as a Health Factor in Computerized Patient Record System (CPRS)
- History of gender alteration

## **RELATIONSHIP OF DENOMINATOR TO NUMERATOR**

All cases in the denominator are equally eligible to appear in the numerator

## **DENOMINATOR (INDEX) EVENT**

Encounter

## **DENOMINATOR TIME WINDOW**

Time window precedes index event

## **NUMERATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Women with evidence of a mammography performed in the past two years

### **Note:**

*Screened for breast cancer:* Evidence of mammography performed. Tests completed at a Veterans Affairs Medical Center (VAMC) must have results in the medical record or Veterans Information System and Technology Architecture (VISTA) with interpretation. If completed in the private sector or another VAMC, historical documentation in progress note that test was performed, with dates to determine if accomplished in the qualifying time period, is sufficient. Clinically relevant documentation must also include findings (e.g., 'normal').

*Past two years:* During period starting the 1<sup>st</sup> of the 24<sup>th</sup> month prior to the 'study interval' beginning date extending to last day of the month under study.

### **Exclusions**

Unspecified

## **MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## **NUMERATOR TIME WINDOW**

Fixed time period

## **DATA SOURCE**

Administrative data  
Medical record

#### **LEVEL OF DETERMINATION OF QUALITY**

Individual Case

#### **PRE-EXISTING INSTRUMENT USED**

Unspecified

### **Computation of the Measure**

#### **SCORING**

Rate

#### **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

#### **ALLOWANCE FOR PATIENT FACTORS**

Unspecified

#### **STANDARD OF COMPARISON**

Internal time comparison

### **Evaluation of Measure Properties**

#### **EXTENT OF MEASURE TESTING**

Unspecified

### **Identifying Information**

#### **ORIGINAL TITLE**

Breast cancer screening.

#### **MEASURE COLLECTION**

[Fiscal Year \(FY\) 2009: Veterans Health Administration \(VHA\) Performance Measurement System](#)

#### **MEASURE SET NAME**

[Performance Measures](#)

**MEASURE SUBSET NAME**

[Effectiveness of Care -- Prevention and Screening](#)

**DEVELOPER**

Veterans Health Administration

**FUNDING SOURCE(S)**

Unspecified

**COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE**

Unspecified

**FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

Unspecified

**ADAPTATION**

Measure was not adapted from another source.

**RELEASE DATE**

2000 Dec

**REVISION DATE**

2009 Jan

**MEASURE STATUS**

This is the current release of the measure.

This measure updates a previous version: Office of Quality and Performance (10Q). FY 2008, Q1 technical manual for the VHA performance measurement system. Washington (DC): Washington (DC); 2007 Oct 31. 315 p.

**SOURCE(S)**

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

**MEASURE AVAILABILITY**

The individual measure, "Breast Cancer Screening," is published in "FY 2009, Q2 Technical Manual for the VHA Performance Measurement System."

For more information contact:

Department of Veterans Affairs  
Office of Quality and Performance (10Q)  
ATTN: Lynnette Nilan, E-mail: [lynnette.nilan@va.gov](mailto:lynnette.nilan@va.gov) or  
Tammy Czarnecki, E-mail: [tammy.czarnecki2@va.gov](mailto:tammy.czarnecki2@va.gov)

## **NQMC STATUS**

This NQMC summary was completed by ECRI on April 18, 2003. The information was verified by the Veterans Health Administration on May 20, 2003. This NQMC summary was updated by ECRI Institute on December 7, 2004 and again on January 10, 2008. The information was not verified by the measure developer. This NQMC summary was updated again by ECRI Institute on December 11, 2009. The information was verified by the measure developer on March 22, 2010.

## **COPYRIGHT STATEMENT**

No copyright restrictions apply.

## **Disclaimer**

### **NQMC DISCLAIMER**

The National Quality Measures Clearinghouse™ (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the NQMC Inclusion Criteria which may be found at <http://www.qualitymeasures.ahrq.gov/about/inclusion.aspx>.

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. The inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.



[Copyright/Permission Requests](#)

Date Modified: 5/17/2010

